



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

6/17/14

Shawna Wagner  
503 S. Main  
Carroll, Iowa 51401

Dear Child Care Provider,

This letter is in regards to the 6/17/14 compliance check of your Level B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.4 No more children are in care than the rules for the specific category will allow. [10 children present, no approved assistant present]

☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards. [baby naps in unapproved positioner, outlets uncapped, over childcare numbers]

☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child. [seizure medication accessible to older children, but moved during visit per DHS request]

☐ 110.5(1)e All accessible electrical outlets are safely capped.

☐ 110.5(1)p Children under the age of one year are placed on their backs for sleeping unless otherwise authorized in writing by a physician. [provider agreed to place infant in pack and play for nap effectively immediately]

☐ 110.5(1)q All dogs and cats have annual examinations. Records of the exams are on file and must verify that routine immunizations are current and animal is free of endo and ecto parasites.

☐ 110.5(2) A provider file is maintained and contains:

☐ 110.5(2)b Certification by an approved trainer/organization in infant and child first-aid that includes mouth-to-mouth resuscitation. Certification will be maintained throughout period of registration. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.

☐ 110.5(2)c An individual file is maintained for each staff assistant and contains:

☐ 110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396

☐ 110.5(2)c A completed Request for Child Abuse Information, form 470-0643

☐ 110.5(2)c A physician's signed statement of health and immunization status at the time of employment and at least every two years thereafter.

☐ 110.5(2)c Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years.

☐ 110.5(8) Children's Files

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.

☐ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health.

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

☐ 110.9(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME  
CATEGORY "B"

☐ 110.9(1)a Not more than six preschool children present at any one time including infants.

☐ 110.9(1)d Not more than two children who are receiving care on a part-time basis at any one time.

☐ 110.9(1)f When more than 8 children are present for more than two hours, a DHS-approved assistant at least 14 years old is present.

**Effective immediately, you must discontinue caring for more than the allowed number of children until an assistant is approved by the Central Registration Unit.** Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration.

**Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all other above-mentioned violations within the next 30 days.** Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

**Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.**

**Please sign and date below, and return this form in the provided envelope by: 7/17/14**

X \_\_\_\_\_  
Signature Date

Please do not hesitate to contact me at DHS at 712-792-4391 ext. 222 if you have any questions regarding this letter.

Sincerely,

Jeana Kanne  
Social Worker II

**Always Remember:**

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 877-216-8481 or <http://www.iowaccrr.org>.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://www.dhs.state.ia.us/Consumers/Child\\_Care/Professional\\_Development.html](http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html) and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).